Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 1 of 66

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself			
			About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar licer Brin- iden	e the name that is on government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your etting with the trustee.	Donna First name J Middle name Poe Last name and Suffix (Sr., Jr., II, III)	1	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-0677		

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Document Page 2 of 66 Desc Main

Case number (if known) Debtor 1 Donna J Poe

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	2815 Summerdale Ave	If Debtor 2 lives at a different address:
		Rockford, IL 61101 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Winnebago	0
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 3 of 66

Case number (if known) Debtor 1 Donna J Poe

Par	Tell the Court About	Your Ba	ınkruptcy Ca	se								
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.										
	choosing to file under	☐ Chapter 7										
		☐ Ch	apter 11									
		☐ Ch	apter 12									
		■ Ch	apter 13									
8.	How you will pay the fee	;	about how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	n, cashier's check, or money				
				the fee in installments. If ye in Installments (Official For		e this option, sign	and attach the Applica	ation for Individuals to Pay				
			I request that	t my fee be waived (You ma	ay request	this option only it	f you are filing for Chap	oter 7. By law, a judge may,				
				uired to, waive your fee, and ir family size and you are una								
				n to Have the Chapter 7 Filin								
9.	Have you filed for bankruptcy within the	□ No.										
	last 8 years?	Yes	S.									
			District	NDIL WD Chapter 13	When	2/06/14	Case number	14-80347				
			District	ND IL WD Chapter 13	When	5/26/11	Case number	11-82403				
			District		When		Case number					
10.	Are any bankruptcy	■ No										
	cases pending or being filed by a spouse who is	☐ Yes	S.									
	not filling this case with you, or by a business partner, or by an affiliate?											
			Debtor				Relationship to y	ou				
			District		When		Case number, if	known				
			Debtor				Relationship to y	ou				
			District		_ When		Case number, if	known				
	Do you rent your	■ No.	Go to li	ne 12.								
	residence?				ion iudam	ant against vous	nd do vou wont to otov	in vous socidon on 2				
		☐ Yes		ur landlord obtained an evicti	ion juagm	eni ayanisi you a	na ao you wani io stay	in your residence?				
			_	No. Go to line 12.		,		4044)				
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About ai	n Eviction Judgme	ent Against You (Form	101A) and file it with this				
				1 71								

Document Page 4 of 66 Case number (if known) Debtor 1 Donna J Poe Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs?

Debtor 1 Donna J Poe Document Page 5 of 66 Case number (if known)

Part 5:

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 6 of 66

Case number (if known) Debtor 1 Donna J Poe Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donna J Poe Signature of Debtor 2 Donna J Poe Signature of Debtor 1 Executed on Executed on November 28, 2017 MM / DD / YYYY MM / DD / YYYY

Debtor 1 Donna J Poe Document Page 7 of 66 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Gary C. Flanders	Date	November 28, 2017
Signature of Attorney for Debtor	-	MM / DD / YYYY
Gary C. Flanders 6180219		
Printed name		
Bankruptcy Clinic		
Firm name		
1 Court Place		
Rockford, IL 61101		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
6180219		
Bar number & State		

		Document	Page 8 of 66
Fill in this infor	mation to identify your	case:	
Debtor 1	Donna J Poe		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF IL	LINOIS

☐ Check if this is an amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	33,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	59,270.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	92,270.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	120,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	4,900.00
	Your total liabilities	\$	124,900.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,354.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,414.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes What kind of debt do you have?		

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

Entered 11/28/17 16:13:35 Desc Main Doc 1 Filed 11/28/17 Case 17-82804 Document

Page 9 of 66 Case number (if known) Debtor 1 Donna J Poe

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

5,675.00 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Ca	se 17-82804	Doc 1		11/28/17 ument	Entered 11/28/3	17 16:13	:35 De	sc M	lain
Fill	in this inform	nation to identify	your case and t	his filing):					
Deb	otor 1	Donna J Poe)							
		First Name	Middl	le Name		Last Name				
	otor 2 use, if filing)	First Name	Middl	le Name		Last Name				
Unit	ted States Bar	nkruptcy Court for	the: NORTHER	RN DISTI	RICT OF ILLIN	IOIS				
	se number _	. ,				-				Check if this is an
									á	amended filing
n ea hink nfor	chedule ch category, se tit fits best. Be	as complete and a space is needed, a	operty escribe items. List	le. If two	married people	n asset fits in more than on e are filing together, both are e top of any additional page:	equally resp	onsible for su	pplying	g correct
	_		ilding, Land, or O	ther Real	Estate You Ow	n or Have an Interest In				
D	a vau awn ar h	ave any logal or ag	uitable interest in	any raaid	anaa huildina	land or similar property?				
_	_		uitable liiterest iii d	any resid	ence, bunding,	land, or similar property?				
	No. Go to Part									
	Yes. Where is	the property?								
1.1				What	is the property	? Check all that apply				
	2815 Sumi	merdale Ave.			Single-family h	nome	Do not ded	uct secured cla	aims or	exemptions. Put
	Street address, i	f available, or other desc	cription		Duplex or mult Condominium	-				s on Schedule D: ured by Property.
					Manufactured	or mobile home	Current va	lue of the	Curr	ent value of the
	Rockford	IL State	61101-0000 ZIP Code	_	Land Investment pro	on orty	entire prop	erty? 33,000.00	porti	on you own? \$33,000.00
	City	State	ZIF Code		Timeshare	рренту		<u> </u>		
					Other		(such as fe	e simple, ten		nership interest y the entireties, or
				Who	has an interest Debtor 1 only	in the property? Check one	a life estate ownersh	e), if known. N iD		
	Winnebag	0		_	Debtor 2 only			•		
	County				Debtor 1 and E	Debtor 2 only	Ob a st	if 4bio! : :		
						the debtors and another		t if this is con structions)	imunity	у ргорепту
					information yo	ou wish to add about this ite	m, such as lo	cal		

subject to mortgage indebtedness of DiTech Financial, LLC

pages you have attached for Part 1. Write that number here......>>

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

\$33,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 11 of 66 Case number (if known) Debtor 1 **Donna J Poe** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Lincoln Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: MKZ ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2007 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 84,000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another Dealer retail value \$7000.00 \$5,500.00 \$5,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Cadillac 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: SRX Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2010 Year: Debtor 2 only Current value of the Current value of the 99,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Subject to security interest of \$18,000.00 \$18,000,00 Credit Acceptance dealer retail ☐ Check if this is community property (see instructions) value \$20,000.00 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$23,500.00 pages you have attached for Part 2. Write that number here.....= Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... beds, 3 tables, 4 dressers, sofa, loveseat, stove, refrigerator, washer, dryer, dining room set, desk microwave oven, etc. with \$2,300.00 estimated retail value of \$4600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

Cell phone with estimated retail value of \$200.00

\$100.00

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 12 of 66 Case number (if known)

Debtor 1	Donna J Poe	Case number (if known)	
	tibles of value oles: Antiques and figurines; pa other collections, memora	nintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin abilia, collectibles	, or baseball card collections;
■ Yes	s. Describe		
		DVD players, computer, 10 dvds, 100 cds, with estimated ue of \$800.00	\$400.00
	ment for sports and hobbies oles: Sports, photographic, exe musical instruments	rcise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
_	s. Describe		
	bicycle w	vith estimated retail value of \$400.00	\$200.00
□ No		ammunition, and related equipment	
	firearm v	with estimated retail value of \$600.00	\$300.00
□ No		eather coats, designer wear, shoes, accessories	
	clothing	with estimated retail value of \$700.00	\$300.00
□ No		ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	jewelry, v	with estimated retail value of \$1600.00	\$800.00
<i>Exan</i> ■ No	farm animals nples: Dogs, cats, birds, horses b. Describe		
14. Any c	other personal and household	d items you did not already list, including any health aids you did not list	
■ Yes	Give specific information		
	hand too	Is and power tools, with estimated retail value of \$400.00	\$200.00
	lawn mov	wer with estimated retail value of \$200.00	\$100.00
	snow blo	ower with estimated retail value of \$200.00	\$100.00

Official Form 106A/B

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 13 of 66

Case number (if known) Debtor 1 Donna J Poe 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,800.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No ■ Yes..... \$20.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... 17.1. checking **Heritage Credit Union** \$100.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$30.000.00 401(k) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 14 of 66 Case number (if known) Debtor 1 Donna J Poe 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit $\hfill \square$ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Estimate of 2017 tax refund **Federal and State** \$500.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

Yes. Name the insurance company of each policy and list its value.

Company name: Beneficiary:

Surrender or refund

value.

Life insurance policy with death benefit

only

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

☐ Yes. Give specific information..

Del	btor 1	Case 17-8 Donna J Poe	2804	Doc 1	Filed 11/28/17 Document	Entered 11/28/17 16:13:3 Page 15 of 66 Case number (if kn	
33.	Claims	against third par	rties, whe	ther or not	ou have filed a lawsu	it or made a demand for payment	
_	Examp				surance claims, or rights		
	■ No □ Yes.	Describe each cla	aim				
34.	Other c	ontingent and u	nliquidate	ed claims of	every nature, includin	g counterclaims of the debtor and rig	hts to set off claims
	■ No □ Yes.	Describe each cla	aim				
35.	Any fina	ancial assets you	u did not	already list			
	■ No □ Yes.	Give specific info	rmation				
36.						ny entries for pages you have attache	d \$30,620.00
Par	t 5: Des	scribe Any Busines	s-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
	Do you o 3 No. Go		gal or equit	table interest i	in any business-related p	roperty?	
	Yes. G	o to line 38.					
							Current value of the portion you own? Do not deduct secured
							claims or exemptions.
	Accour	nts receivable or	commiss	ions you alr	eady earned		
		Describe					
ı	<i>Examp</i> ■ No	equipment, furnis lles: Business-rela Describe			re, modems, printers, co	opiers, fax machines, rugs, telephones, o	desks, chairs, electronic devices
_	Machin □ No	ery, fixtures, equ	uipment, s	supplies you	ı use in business, and	tools of your trade	
_		Describe					
		[work to	ols, with e	stimated retail value	e of \$100	\$50.00
		[Work to	ols with es	stimated retail value	of \$600.00	\$300.00
4.4							
	Invento ■ No	ory					
		Describe					
		ts in partnership	s or joint	ventures			
	■ No	Cive on a sife to		oout the ac-			
L	∟ res.	Give specific info	imation at	วงนเ เทem			

Official Form 106A/B Schedule A/B: Property page 6

% of ownership:

Name of entity:

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 16 of 66 Case number (if known) Debtor 1 **Donna J Poe** 43. Customer lists, mailing lists, or other compilations No. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ■ No ☐ Yes. Describe..... 44. Any business-related property you did not already list ■ No ☐ Yes. Give specific information....... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$350.00 for Part 5. Write that number here..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$33,000.00 56. Part 2: Total vehicles, line 5 \$23,500.00 Part 3: Total personal and household items, line 15 57. \$4,800.00 Part 4: Total financial assets, line 36 \$30,620.00 Part 5: Total business-related property, line 45 59. \$350.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62 \$92,270.00

\$0.00

Copy personal property total

\$59.270.00

Official Form 106A/B Schedule A/B: Property page 7

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

\$59.270.00

		DUCUITIE	III Paue 17 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Donna J Poe			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the P	roperty	You	Claim	as Exempt	i
---------	----------	-------	---------	-----	-------	-----------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	2815 Summerdale Ave. Rockford, IL 61101 Winnebago County	\$33,000.00		\$15,000.00	735 ILCS 5/12-901	
S [subject to mortgage indebtedness of DiTech Financial, LLC Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	2007 Lincoln MKZ 84,000 miles Dealer retail value \$7000.00	\$5,500.00		\$2,400.00	735 ILCS 5/12-1001(c)	
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	beds, 3 tables, 4 dressers, sofa, loveseat, stove, refrigerator, washer,	\$2,300.00		\$2,000.00	735 ILCS 5/12-1001(b)	
drye micr retai	dryer, dining room set, desk microwave oven, etc. with estimated retail value of \$4600.00 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
	Cell phone with estimated retail value of \$200.00	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		

Filed 11/28/17 Entered 11/28/17 16:13:35 Case 17-82804 Desc Main Doc 1

Page 18 of 66 Case number (if known) Document Debtor 1 Donna J Poe

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	3 TVs, 2 DVD players, computer, 10 dvds, 100 cds, with estimated retail value of \$800.00	\$400.00	\$150.00 100% of fair market value, up to	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 8.1		any applicable statutory limit	
	bicycle with estimated retail value of \$400.00	\$200.00	\$25.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 9.1		100% of fair market value, up to any applicable statutory limit	
	clothing with estimated retail value of \$700.00	\$300.00	\$300.00	735 ILCS 5/12-1001(a)
	Line from Schedule A/B: 11.1		100% of fair market value, up to any applicable statutory limit	
	jewelry, with estimated retail value of \$1600.00	\$800.00	\$500.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 12.1		100% of fair market value, up to any applicable statutory limit	
	hand tools and power tools, with estimated retail value of \$400.00	\$200.00	\$200.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 14.1		100% of fair market value, up to any applicable statutory limit	
	lawn mower with estimated retail value of \$200.00	\$100.00	\$100.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 14.2		100% of fair market value, up to any applicable statutory limit	
	snow blower with estimated retail value of \$200.00	\$100.00	\$50.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 14.3		100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$20.00	\$20.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
	checking: Heritage Credit Union Line from Schedule A/B: 17.1	\$100.00	\$100.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
	401(k) Line from Schedule A/B: 21.1	\$30,000.00		735 ILCS 5/12-1006
			100% of fair market value, up to any applicable statutory limit	
	Federal and State: Estimate of 2017 tax refund	\$500.00	\$500.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 28.1		100% of fair market value, up to any applicable statutory limit	
	work tools, with estimated retail value of \$100	\$50.00	\$50.00	735 ILCS 5/12-1001(d)
	Line from Schedule A/B: 40.1		100% of fair market value, up to any applicable statutory limit	

Filed 11/28/17 Entered 11/28/17 16:13:35 Document Page 19 of 66 Donna J Poe Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Work tools with estimated retail 735 ILCS 5/12-1001(d) \$300.00 \$300.00 value of \$600.00 Line from Schedule A/B: 40.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 17-82804

Yes

Doc 1

Desc Main

		Document	Page 2	0 of 66			
Fill in this infor	mation to identify you	r case:					
Debtor 1	Donna J Poe						
20210	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	NOIS				
Case number _					Charle	if their in on	
(II KIIOWII)					_	if this is an led filing	
					amend	lea liling	
Official Forr	m 106D						
		Who Have Claims S	Couro	d by Proporty		12/15	
Scriedule	D. Creditors	Wild Have Claims 3	ecure	d by Propert	<u>y </u>	12/13	
		f two married people are filing together					
is needed, copy th number (if known)		out, number the entries, and attach it to	this form. C	In the top of any addition	nal pages, write your na	me and case	
, ,	s have claims secured by	your property?					
`	-	nis form to the court with your other s	chedules.	ou have nothing else to	o report on this form.		
_		•		ou have houring olde to			
	n all of the information b	Delow.					
Part 1: List A	III Secured Claims			Column A	Column B	Column C	
		nore than one secured claim, list the credi		у		Unsecured	
		s a particular claim, list the other creditors in Part ical order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	portion	
	·			value of collateral.	claim	If any	
2.1 Credit Ac	ceptance	Describe the property that secures the	e claim:	\$20,000.00	\$20,000.00	\$0.00	
Creditor 5 Mair	ic	2010 Cadilac SRX					
25505 Tw	elve Mile Road	As of the date you file, the claim is: Chapply.	neck all that				
Southfiel	d, MI 48034	☐ Contingent					
Number, Stree	et, City, State & Zip Code	☐ Unliquidated					
		☐ Disputed					
Who owes the d	ebt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only		An agreement you made (such as mo	ortgage or se	ecured			
Debtor 2 only		car loan)					
Debtor 1 and D	ebtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)				
	the debtors and another	☐ Judgment lien from a lawsuit					
Check if this community do		Other (including a right to offset)	'urchase	Money Lien agains	<u> </u>		
community d	ebi						
Date debt was inc	2/2017	Last 4 digits of account numbe	er				
	inancial LC	Describe the property that secures the	e claim:	\$100,000.00	\$33,000.00	\$67,000.00	
Creditor's Nam	ne	2815 Summerdale Ave. Rockf	ord, IL				
		61101 Winnebago County					
		subject to mortgage indebted of DiTech Financial, LLC	ness				
P.O. Box	· · · -	As of the date you file, the claim is: Ch	neck all that				
Rapid Cit 57709-61		apply.					
	et, City, State & Zip Code	☐ Contingent ☐ Unliquidated					
rumber, once	it, Oity, Otate & Zip Oode	Disputed					
Who owes the d	ebt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only		An agreement you made (such as mo	ortgage or se	ecured			
Debtor 2 only		car loan)					
	☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)						
	the debtors and another	☐ Judgment lien from a lawsuit	,				
☐ Check if this c		_	nortgage	against			
community d	ebt	, _					

Official Form 106D

Date debt was incurred

Last 4 digits of account number

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 21 of 66

Debtor 1 Donna J Poe		Case num	Case number (if know)				
First Name Middle N	lame Last Name	_					
2.3 DiTech Financial, LLC	Describe the property that secures	the claim:	\$0.00	\$0.00	\$0.00		
Creditor's Name c/o Manley Deas Kochalski, LLC	notice only						
One East Wacker Suite 1250 Chicago, IL 60601	As of the date you file, the claim is: apply. Contingent	Check all that					
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as car loan)	mortgage or secured					
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, me☐ Judgment lien from a lawsuit	chanic's lien)					
☐ Check if this claim relates to a community debt	Other (including a right to offset)	mortgage against					
Date debt was incurred	Last 4 digits of account num	ber					
Add the dollar value of your entries in C	Column A on this page. Write that num	ber here:	\$120,000.00				
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.		\$120,000.00				

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Filed 11/28/17 Case 17-82804 Doc 1 Entered 11/28/17 16:13:35 Desc Main

Document Page 22 of 66 Fill in this information to identify your case: Debtor 1 Donna J Poe Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 AF Castrogiovanni DDS, PC Last 4 digits of account number 0031 \$0.00 Nonpriority Creditor's Name When was the debt incurred? 3120 N. Rockton Ave. Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes

Document Page 23 of 66 Debtor 1 Donna J Poe Case number (if know) 4.2 Candica LLC Last 4 digits of account number \$0.00 Nonpriority Creditor's Name c/o Weinstein and Riley PS When was the debt incurred? 2001 Western Ave. Ste 400 Seattle, WA 98121-3132 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes **Capital One** 4.3 Last 4 digits of account number 8248 \$0.00 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice only ☐ Yes 4.4 City of Rockford \$0.00 8748 Last 4 digits of account number Nonpriority Creditor's Name c/o Rockford Mercantile When was the debt incurred? P.O. Box 5847 Rockford, IL 61125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify notice only

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 24 of 66

Debtor 1 Donna J Poe Case number (if know) 4.5 Credit One Bank Last 4 digits of account number 3743 \$0.00 Nonpriority Creditor's Name c/o Nelson, Watson & Assoc. When was the debt incurred? P.O. Box 1299 Haverhill, MA 01830 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only T Yes 4.6 **Equable Ascent Financial** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name c/o Recovery Managment Systems When was the debt incurred? 25 SE 2nd Ave. Suite 1120 Miami, FL 33131 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice only ☐ Yes 4.7 **Granite Recovery** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name **Recovery Management Systems** When was the debt incurred? Corp. 25 SE 2nd Ave. Suite 1120 Miami, FL 33131-1605 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify notice only

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 25 of 66

Debtor 1 Donna J Poe Case number (if know) 4.8 **Midland Credit Management** Last 4 digits of account number 5192 \$0.00 Nonpriority Creditor's Name P.O. Box 60578 When was the debt incurred? Los Angeles, CA 90060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify notice only 4.9 Midland Credit Management Last 4 digits of account number \$0.00 Nonpriority Creditor's Name 8875 Aero Drive Suite 200 When was the debt incurred? San Diego, CA 92123-2255 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice only ☐ Yes 4.1 Midland Funding LLC \$0.00 Last 4 digits of account number Nonpriority Creditor's Name American InfoSource LLC When was the debt incurred? P.O. Box 4457 Houston, TX 77210 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice only

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 26 of 66

Debtor 1 Donna J Poe Case number (if know) **Recovery Management Systems** 4 1 \$0.00 Corp. Last 4 digits of account number Nonpriority Creditor's Name Attn: Ramesh Singh When was the debt incurred? 25 SE 2nd Ave. **Suite 1120** Miami, FL 33131 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice only 4.1 \$0.00 **Rock Valley Women's Health** 6525 Last 4 digits of account number Nonpriority Creditor's Name 6861 Villagreen View When was the debt incurred? Rockford, IL 61107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes 4.1 **Rock Valley Wonen's Health Center** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Creditors Protection Service, When was the debt incurred? Inc P.O. Box 4115 Rockford, IL 61110-0615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify notice only

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 27 of 66

Debtor 1 Donna J Poe Case number (if know) Rockford Health Physician 4 1 \$0.00 Anesthesia 4 Last 4 digits of account number Nonpriority Creditor's Name c/o Creditors Protection Service, When was the debt incurred? Inc. P.O. Box 4115 Rockford, IL 61110-0615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice only 4.1 \$600.00 **Rockford Health Physicians** Last 4 digits of account number 5 Nonpriority Creditor's Name 2300 N. Rockton Ave. When was the debt incurred? Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify medical 4.1 **Rockford Health System** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 4628 When was the debt incurred? Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify notice only

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 28 of 66

Debtor	1 Donna J Poe	Case number (if know)	
4.1	Rockford Mercantile	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 2502 S. Alpine	When was the debt incurred?	
	Rockford, IL 61108 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.1	Rockford Mercantile	Last 4 digits of account number	\$4,300.00
	Nonpriority Creditor's Name 2502 S. Alpine	When was the debt incurred?	
	Rockford, IL 61108 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify medical	
4.1	Rockford Orthopedic		\$0.00
9	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
	P.O. Box 5247 Rockford, IL 61125	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify notice only

Debto	or 1 Donna J Poe	Document Page 29 of 66 Case number (if know)					
4.2							
0	Rockford Orthopedic	Last 4 digits of account number	\$0.00				
	Nonpriority Creditor's Name c/o Rockford Mercantile 2502 S. Alpine Rockford, IL 61108	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specifynotice only					
4.2	Rockford Radiology	Last 4 digits of account number	\$0.00				
	Nonpriority Creditor's Name P.O. Box 1790 Brookfield, WI 53008	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Other. Specify notice only					
4.2	Rockford Radiology	Last 4 digits of account number	\$0.00				
	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·				
	c/o Rockford Mercantile	When was the debt incurred?					
	P.O. Box 5847						
	Rockford, IL 61125 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	The state of the s					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
		☐ Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					

■ No

☐ Yes

■ Other. Specify notice only

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor	Case 17-82804 Doc 1 1 Donna J Poe	Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Ma Document Page 30 of 66 Case number (if know)	in
4.2	SFC-Central Bankruptcy	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name P.O. Box 1893 Spartanburg, SC 29304-1893	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4	UIC Clinics	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Creditors Protection Servicem Inc. P.O. Box 4115 Rockford, IL 61110-0615	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify notice only	
4.2			
5	Vanda LLC	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Weinstein & Riley PS 2001 Wesern Ave. Ste 400 Seattle, WA 98121-3132	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify notice only

Type of NONPRIORITY unsecured claim:

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

debt

■ No

☐ Yes

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 31 of 66

Debtor 1 Donna J Poe

Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	4,900.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	4,900.00

Page 32 of 66 Document Fill in this information to identify your case: Debtor 1 Donna J Poe Middle Name First Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Name				
	Number	Street			-
	City		State	ZIP Code	_
2.2	Oity		Glate	211 0000	
2.2					_
	Name				
	Number	Street			_
	Number	Sireet			
					_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	U.I.J				
2.4					_
	Name				
	Number	Street			_
	Number	Sireet			
					_
	City		State	ZIP Code	
2.5					
	Name				_
					<u>_</u>
	Number	Street			
	City		State	ZIP Code	_
	,		0.0.0	0000	

Filed 11/28/17 Case 17-82804 Doc 1 Entered 11/28/17 16:13:35 Desc Main

Page 33 of 66 Document Fill in this information to identify your case: Debtor 1 Donna J Poe Middle Name First Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ■ No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G, line Number Street Citv ZIP Code State 3.2 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G, line

Street

State

Number

City

7IP Code

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 34 of 66

Fill	in this information to identify you	r case:									
	btor 1 Donna J F										
	btor 2 buse, if filing)				_						
Uni	ited States Bankruptcy Court for t	he: NORTHERN DISTRIC	CT OF ILLINOIS		_						
	se number					heck if this is: An amende A suppleme	_				
0	fficial Form 106I					MM / DD/ Y		oming dato.			
	chedule I: Your In	come				WIWI / DD/ T			12/15		
sup spo atta	as complete and accurate as population of the plying correct information. If you are separated and you a separate sheet to this form	ou are married and not filir our spouse is not filing wi n. On the top of any additi	ng jointly, and your sith you, do not include	spouse i de inforr	s living v	vith you, inclu oout your spo	ude informa	ation about e space is	your needed,		
1.	Fill in your employment information.			Debtor 1			Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	☐ Employed ☐ Not employed							
	employers.	Occupation	machinist	_							
	Include part-time, seasonal, or self-employed work.	Employer's name	Mechanical Too Engineering	_							
	Occupation may include studer or homemaker, if it applies.	t Employer's address	4701 Kishwaukee Street P.O. Box 5906 Rockford, IL 61125								
Par	rt 2: Give Details About N	How long employed to	here? 22 years	s							
Esti spoi	mate monthly income as of the use unless you are separated.	date you file this form. If	, ,				•	·	· ·		
	e spáce, attach a separate sheet					Debtor 1	For Debt		•		
2.	List monthly gross wages, sa deductions). If not paid monthl			2.	\$	5,500.00	\$	N/A			
3.	Estimate and list monthly over	ertime pay.		3.	+\$	0.00	+\$	N/A			
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	5,500.00	\$	N/A			

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 35 of 66

Debt	or 1	Donna J Poe	-	Case i	number (<i>if known</i>)			
				For	Debtor 1		or Debtor on-filing s		
	Cor	py line 4 here	4.	\$	5,500.00		mi-ming s	N/A	l.
5.	Liet	t all payroll deductions:			·				=
J.			Fo	ď	4 420 00	•		NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	1,430.00 0.00			N/A N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	<u> </u>		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	375.00			N/A	-
	5e.	Insurance	5e.	\$	335.00) \$		N/A	
	5f.	Domestic support obligations	5f.	\$	0.00			N/A	-
	5g. 5h.	Union dues Other deductions. Specify: Uniforms	5g. 5h.+	\$ 	0.00			N/A	-
•			_	_	6.00			N/A	-
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,146.00			N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,354.00) \$_		N/A	-
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00) \$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00) \$		N/A	
	8d.		8d.	\$ 	0.00	_ :-		N/A	
	8e.	Social Security	8e.	\$	0.00	_		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00) \$		N/A	-
	8g.	Pension or retirement income	8g.	\$	0.00			N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	_ + \$_		N/A	=
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$;	3,354.00 +	\$	N/A	= \$	3,354.00
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.								0.00
12.	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies							\$Combin	3,354.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						y income
		Yes. Explain: Income fluctuates with hours of employment.							
		internetination in the mode of one profittion							

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 36 of 66

Fill	in this informa	tion to identify ye	our case:							
	tor 2	Donna J Poe	•			Che		wing postpetition chapter		
` '	ouse, if filing)				0.0		13 expenses as of	the following date:		
Unite	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY			
1	e number nown)									
		rm 106J								
		J: Your						12/15		
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this i n.						
Part	t 1: Descr	ibe Your House	hold							
	■ No. Go to	line 2.	in a senar	ate household?						
	□и	0	·	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.			
2.	Do you have	Do you have dependents? ■ No								
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?		
	Do not state dependents							□ No □ Yes		
	dopondomo	namoo.						□ No		
								☐ Yes ☐ No		
								☐ Yes		
								□ No		
3.	Do your exp	enses include	_	No				☐ Yes		
		f people other t d your depende	han $_{\square}$	Yes						
Esti	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance it cluded it on <i>Schedule I: Y</i>			Your exp	enses		
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4. S	.	810.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a. S	\$	0.00		
	4b. Prope	rty, homeowner'				4b. \$	5	0.00		
		maintenance, re owner's associa		ipkeep expenses		4c. \$ 4d. \$		100.00 0.00		
5				oominium dues our residence, such as ho	me equity loans	4u. 3	·	0.00		

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 37 of 66

na J Poe	Case number (if ki	nown)
ricity, heat, natural gas	6a. \$	250.00
•	6b. \$	80.00
	· —	239.00
	· —	0.00
		300.00
	·	0.00
•	·	100.00
•	· -	50.00
•	11. \$	75.00
	12 \$	250.00
	· <u></u>	0.00
	· —	
contributions and religious donations	14. φ	0.00
do incurance doducted from your pay or included in lines 4 or 20		
	15a ¢	0.00
		0.00
	- · · · · · · · · · · · · · · · · · · ·	
		160.00
		0.00
not include taxes deducted from your pay or included in lines 4 or 2		0.00
	16. \$	0.00
	47- A	0.00
	· -	0.00
	· —	0.00
		0.00
		0.00
		0.00
nents you make to support others who do not live with you.	·	0.00
		0.00
	· —	0.00
	·	0.00
enance, repair, and upkeep expenses	20d. \$	0.00
eowner's association or condominium dues	20e. \$	0.00
cify:	21. +\$	0.00
· · · · · · · · · · · · · · · · · · ·		
* *		
· ·		2,414.00
ine 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2 \$	
e 22a and 22b. The result is your monthly expenses.	\$	2,414.00
		· · · · · · · · · · · · · · · · · · ·
	*	
· · · · · · · · · · · · · · · · · · ·		3,354.00
your monthly expenses from line 22c above.	23b\$	2,414.00
	220	940.00
esult is your monthly net income.	23C. Þ	340.00
pect an increase or decrease in your expenses within the year		
do you expect to finish paying for your car loan within the year or do you exp		
The orange of the second of th	tor lease payments: cayments for Vehicle 1 cayments for Vehicle 2 r. Specify: r. Specify: ents of alimony, maintenance, and support that you did not repromyour pay on line 5, Schedule I, Your Income (Official Formments you make to support others who do not live with you. property expenses not included in lines 4 or 5 of this form or orgages on other property estate taxes erty, homeowner's, or renter's insurance tenance, repair, and upkeep expenses eowner's association or condominium dues cify: rour monthly expenses less 4 through 21.	ricity, heat, natural gas r, sewer, garbage collection 6b. \$ shohene, cell phone, Internet, satellite, and cable services r. Specify: 6c. \$ r. Specify: 6d. \$ shousekeeping supplies 77. \$ should right of the control o

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 38 of 66

Fill in th	nis information to identify your	case:			
Debtor '					
Dahtaní	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if	<u> </u>	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Casa ni	umb or				
(if known)					Check if this is an amended filing
Officia	al Form 106Dec				
	laration About a	an Individua	al Debtor's So	chedules	12/15
years, o	Sign Below	1519, and 3571.			
Die	I you pay or agree to pay som	eone who is NOT an att	orney to help you fill out I	bankruptcy forms?	
	No				
	Yes. Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	ler penalty of perjury, I declare they are true and correct.	that I have read the su	ımmary and schedules file	ed with this declaration	on and
Х	/s/ Donna J Poe		X		
	Donna J Poe Signature of Debtor 1		Signature of	f Debtor 2	
	Date November 28, 2017		Date		

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 39 of 66

Fill in	this inform	nation to identify you	r case:			
Debto	r 1	Donna J Poe				
		First Name	Middle Name	Last Name		
Debtoi (Spouse		First Name	Middle Name	Last Name		
United	States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (DF ILLINOIS		
Case r	number				_	Check if this is an mended filing
		rm 107 of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/10
nform numbe	ation. If mer (if known	ore space is needed, a). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup additional pages, write you	
Part 1	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
I. W	hat is your	current marital statu	ıs?			
	l Married Not mar	ried				
2. Di	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	l No l Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
D	ebtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	l No l Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Ot	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fil	ll in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once un		ndar years?
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$61,800.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Entered 11/28/17 16:13:35 Case 17-82804 Doc 1 Filed 11/28/17 Desc Main Document Page 40 of 66 Case number (if known) Debtor 1 Donna J Poe Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$61,300.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$60,975.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. (before deductions each source Describe below. and exclusions) (before deductions and exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Credit Acceptance	2017	\$1,605.00	\$20,000.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main

Page 41 of 66
Case number (if known) Document Debtor 1 Donna J Poe

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Prestige Financial	2017	\$615.00	\$0.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		yments or transfer a	nny property on a	ccount of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	itor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	DiTech vs. Poe	Foreclosure	Winnebago Co	unty	■ Pending □ On appe □ Conclude	
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		cluding a bank or fir	nancial institutior	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took		action was	Amount
				taker	1	

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 42 of 66 Debtor 1 Donna J Poe Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. 2017 \$8,000.00 **Gambling losses** Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made

Credit Counseling

\$15.00

Person Who Made the Payment, if Not You

Summit Financial Education

2017

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Page 43 of 66 Case number (if known) Document

Debtor 1 Donna J Poe

 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer a promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes Fill in the details 					or transfer any prope	rty to anyone who	
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa ade as security (such as t	iirs? he granting of a s				
	Deven Whe Descived Transfer	Description and value of Describe any property or				Data transfer was	
	Person Who Received Transfer Address		property transferred payments received or debts paid in exchange			Date transfer was made	
	Person's relationship to you						
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a s	elf-settled tr	ust or similar device	of which you are a	
	Name of trust	Name of trust Description and value of the property transferred Date Transfer was					
				•		made	
Pa	List of Certain Financial Accounts, Inc	struments, Safe Deposit	Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso	or other financial accour	nts; certificates (of deposit; sl			
	☐ Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourtinstrument	clo mo	nte account was osed, sold, oved, or unsferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any	/ safe deposi	t box or other depos	itory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit of the No Yes. Fill in the details.	or place other than your	home within 1 y	ear before y	ou filed for bankrupto	ey?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?	

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Page 44 of 66 Case number (if known) Document

Debtor 1 Donna J Poe

Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty you borrowed from, are storing f	or, or hold in trust		
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	t 10: Give Details About Environmental Information	ation				
For	the purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, groun	— ·			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate	, or utilize it or used		
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.			
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	e under or in violation of an environr	mental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	rironmental law? Include settlements	s and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t 11: Give Details About Your Business or Con	nections to Any Business				
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	ny of the following connections to a	ny business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)			
	☐ A partner in a partnership	· , , , , , , , , , , , , , , , , , , ,				
	☐ An officer, director, or managing execut	tive of a corporation				
	☐ An owner of at least 5% of the voting or	-	1			

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Document Page 45 of 66 Debtor 1 Donna J Poe Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donna J Poe **Donna J Poe** Signature of Debtor 2 Signature of Debtor 1 Date November 28, 2017 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$\overline{\text{0.00}}\$ toward the flat fee, leaving a balance due of \$\overline{4,000.00}\$; and \$\overline{\text{0.00}}\$ for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: November 28, 2017		
Signed:		
/s/ Donna J Poe	/s/ Gary C. Flanders	
Donna J Poe	Gary C. Flanders 6180219	
	Attorney for the Debtor(s)	
Debtor(s)		
Do not sign this agreement if the amo	ounts are blank.	

Local Bankruptcy Form 23c

Case 17-82804 Doc 1 Filed 11/28/17 Entered 11/28/17 16:13:35 Desc Main Document Page 56 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Donna J Poe		Case N).	
		Debtor(s)	Chapte	13	
	DISCLOSURE OF COMPENS	SATION OF ATTO	ORNEY FOR	DEBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing one rendered on behalf of the debtor(s) in contemplation of o	of the petition in bankrupto	y, or agreed to be p	id to me, for services rendere	d or to
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received			0.00	
	Balance Due			4,000.00	
2. \$	77.50 of the filing fee has been paid.				
3. 1	Γhe source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. l	■ I have not agreed to share the above-disclosed compens	sation with any other perso	on unless they are m	embers and associates of my la	aw firm.
I	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				m. A
5. l	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspe	ects of the bankrupto	y case, including:	
b c	a. Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, statemed. Representation of the debtor at the meeting of creditors and [Other provisions as needed]	ent of affairs and plan whi	ch may be required;		' ;
7. F	By agreement with the debtor(s), the above-disclosed fee do Applicable to Chapter 7: \$75.00 for each poor of motion for court approval of reaffirmation \$200.00 per hour plus costs (when applicate Representation does not include defense of dismissal proceedings, reinstatement processing the stay actions or other adversary processing the stay action to the sta	ost-petition amendmer on agreement, and atte ble) for all other repres of discharge or discha seedings, judicial lien a sedings or attendance	nt to Schedules; sendance at hearing sentation. rgeability procee avoidances, post	g if required by the court dings, redemption procee petition amendments, rel	; edings, lief
	motion to approve reaffirmation agreemen	t. CERTIFICATION			
	certify that the foregoing is a complete statement of any agankruptcy proceeding.		or payment to me for	r representation of the debtor(s) in
N	ovember 28, 2017	/s/ Gary C. Flan			
D_{ℓ}	ate	Gary C. Flander			
		Signature of Attor Bankruptcy Cli			
		1 Court Place	··· ··		
		Rockford, IL 61	101		
		Name of law firm			

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- Page 58 of 66 Document
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

AFTER THE CASE IS FILED В.

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN *C*. ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$0.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 10/20/17	/
Signed: Lower Ave	Cert Sell
Nome 1	Gary C. Flanders Attorney for the Debtor(s)
*	
Debtor(s)	

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

United States Bankruptcy Court Northern District of Illinois

In re	Donna J Poe		Case No.		
		Debtor(s)	Chapter 13		
	VE.	RIFICATION OF CREDITOR N	MATRIX		
		Number of Creditors: 28			
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	itors is true and correct to th	ne best of my	
Date:	November 28, 2017	/s/ Donna J Poe Donna J Poe Signature of Debtor			

AF Castrogiovanni DDS, PC 3120 N. Rockton Ave. Rockford, IL 61103

Candica LLC c/o Weinstein and Riley PS 2001 Western Ave. Ste 400 Seattle, WA 98121-3132

Capital One P.O. Box 6492 Carol Stream, IL 60197

City of Rockford c/o Rockford Mercantile P.O. Box 5847 Rockford, IL 61125

Credit Acceptance 25505 Twelve Mile Road Southfield, MI 48034

Credit One Bank c/o Nelson, Watson & Assoc. P.O. Box 1299 Haverhill, MA 01830

DiTech Financial LC P.O. Box 6172 Rapid City, SD 57709-6172

DiTech Financial, LLC c/o Manley Deas Kochalski, LLC One East Wacker Suite 1250 Chicago, IL 60601

Equable Ascent Financial c/o Recovery Managment Systems Corp. 25 SE 2nd Ave. Suite 1120 Miami, FL 33131

Granite Recovery Recovery Management Systems Corp. 25 SE 2nd Ave. Suite 1120 Miami, FL 33131-1605 Midland Credit Management P.O. Box 60578 Los Angeles, CA 90060

Midland Credit Management 8875 Aero Drive Suite 200 San Diego, CA 92123-2255

Midland Funding LLC American InfoSource LLC P,O. Box 4457 Houston, TX 77210

Recovery Management Systems Corp. Attn: Ramesh Singh 25 SE 2nd Ave. Suite 1120 Miami, FL 33131

Rock Valley Women's Health 6861 Villagreen View Rockford, IL 61107

Rock Valley Wonen's Health Center c/o Creditors Protection Service, Inc. P.O. Box 4115 Rockford, IL 61110-0615

Rockford Health Physician Anesthesia c/o Creditors Protection Service, Inc. P.O. Box 4115 Rockford, IL 61110-0615

Rockford Health Physicians 2300 N. Rockton Ave. Rockford, IL 61103

Rockford Health System P.O. Box 4628 Carol Stream, IL 60122

Rockford Mercantile 2502 S. Alpine Rockford, IL 61108 Rockford Mercantile 2502 S. Alpine Rockford, IL 61108

Rockford Orthopedic P.O. Box 5247 Rockford, IL 61125

Rockford Orthopedic c/o Rockford Mercantile 2502 S. Alpine Rockford, IL 61108

Rockford Radiology P.O. Box 1790 Brookfield, WI 53008

Rockford Radiology c/o Rockford Mercantile P.O. Box 5847 Rockford, IL 61125

SFC-Central Bankruptcy P.O. Box 1893 Spartanburg, SC 29304-1893

UIC Clinics c/o Creditors Protection Servicem Inc. P.O. Box 4115 Rockford, IL 61110-0615

Vanda LLC c/o Weinstein & Riley PS 2001 Wesern Ave. Ste 400 Seattle, WA 98121-3132